

## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number

10-506970

## CLAIMS AS FILED - PART I

	(Column 1)	(Column 2)
TOTAL CLAIMS		
FOR	NUMBER FILED	NUMBER EXTRA
TOTAL CHARGEABLE CLAIMS	6 minus 20 =	
INDEPENDENT CLAIMS	1 minus 3 =	
MULTIPLE DEPENDENT CLAIM PRESENT		<input type="checkbox"/>

\* If the difference in column 1 is less than zero, enter "0" in column 2

## CLAIMS AS AMENDED - PART II

	(Column 1)	(Column 2)	(Column 3)
AMENDMENT A	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total	6	Minus 20	=
Independent	1	Minus 3	=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM			<input type="checkbox"/>

SMALL ENTITY TYPE	OTHER THAN SMALL ENTITY
RATE	FEES
BASIC FEE	<input type="checkbox"/>
XS 9=	<input type="checkbox"/>
X43=	<input type="checkbox"/>
+145=	<input type="checkbox"/>
TOTAL	OR TOTAL <input type="checkbox"/>

SMALL ENTITY	OTHER THAN SMALL ENTITY
RATE	ADDITIONAL FEE
XS 9=	<input type="checkbox"/>
X43=	<input type="checkbox"/>
+145=	<input type="checkbox"/>
TOTAL ADDIT. FEE	OR TOTAL ADDIT. FEE <input type="checkbox"/>

	(Column 1)	(Column 2)	(Column 3)
AMENDMENT B	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total	6	Minus 20	=
Independent	1	Minus 3	=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM			<input type="checkbox"/>

AMENDMENT B	RATE	ADDITIONAL FEE	RATE	ADDITIONAL FEE
Total	XS 9=	<input type="checkbox"/>	XS18=	<input type="checkbox"/>
Independent	X43=	<input type="checkbox"/>	X86=	<input type="checkbox"/>
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM	+145=	<input type="checkbox"/>	+290=	<input type="checkbox"/>
	TOTAL ADDIT. FEE		OR TOTAL ADDIT. FEE	<input type="checkbox"/>

	(Column 1)	(Column 2)	(Column 3)
AMENDMENT C	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total	6	Minus 20	=
Independent	1	Minus 3	=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM			<input type="checkbox"/>

AMENDMENT C	RATE	ADDITIONAL FEE	RATE	ADDITIONAL FEE
Total	XS 9=	<input type="checkbox"/>	XS18=	<input type="checkbox"/>
Independent	X43=	<input type="checkbox"/>	X86=	<input type="checkbox"/>
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM	+145=	<input type="checkbox"/>	+290=	<input type="checkbox"/>
	TOTAL ADDIT. FEE		OR TOTAL ADDIT. FEE	<input type="checkbox"/>

- If the entry in column 1 is less than the entry in column 2, write "0" in column 3.
- If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."
- If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."
- The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.